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CONFIRMATION NO. 5751

| SERIAL NUMBER | FILING or 371(c) DATE RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
|---------------|----------------------------------|-------|----------------|------------------------|
| 10/084,592 | | 514 | 1645 | 56510.10002 |

APPLICANTS

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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****

04/18/2002

| Foreign Priority claimed | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance OO Initials | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|--------------------------------|---|--|------------------|-----------------|--------------|--------------------|
| 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | KS | 0 | 16 | 2 |

ADDRESS

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 KANSAS CITY, MO 64112
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TITLE

Method and composition for delivery of medicants to animals

| | | |
|-----------------------------------|---|--|
| FILING FEE RECEIVED 460 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
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